

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	TW	70019	2/5/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 + Restricted O Objected

Claim	Final	Original	Date
1	N	N	12/08/00
2	N	N	12/08/00
3	N	N	12/08/00
4	N	N	12/08/00
5	N	N	12/08/00
6	N	N	12/08/00
7	N	N	12/08/00
8	N	N	12/08/00
9	N	N	12/08/00
10	N	N	12/08/00
11	N	N	12/08/00
12	N	N	12/08/00
13	N	N	12/08/00
14	N	N	12/08/00
15	N	N	12/08/00
16	N	N	12/08/00
17	N	N	12/08/00
18	N	N	12/08/00
19	N	N	12/08/00
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22	N	N	12/08/00
23	N	N	12/08/00
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25	N	N	12/08/00
26	N	N	12/08/00
27	N	N	12/08/00
28	N	N	12/08/00
29	N	N	12/08/00
30	N	N	12/08/00
31	N	N	12/08/00
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35	N	N	12/08/00
36	N	N	12/08/00
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40	N	N	12/08/00
41	N	N	12/08/00
42	N	N	12/08/00
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44	N	N	12/08/00
45	N	N	12/08/00
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47	N	N	12/08/00
48	N	N	12/08/00
49	N	N	12/08/00
50	N	N	12/08/00

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
 staple additional sheet here

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